

# TRANSMITTAL FORM

	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%;">Application Number</td> <td>10/698,970</td> </tr> <tr> <td>Filing Date</td> <td>October 31, 2003</td> </tr> <tr> <td>First Named Inventor</td> <td>Anderson, R. Rox</td> </tr> <tr> <td>Group Art Unit</td> <td>3731</td> </tr> <tr> <td>Examiner Name</td> <td>Woo, Julian W</td> </tr> <tr> <td>Attorney Docket No.</td> <td>CDL-026C3</td> </tr> <tr> <td>Patent No.</td> <td>Not applicable</td> </tr> <tr> <td>Issue Date</td> <td>Not applicable</td> </tr> </table>	Application Number	10/698,970	Filing Date	October 31, 2003	First Named Inventor	Anderson, R. Rox	Group Art Unit	3731	Examiner Name	Woo, Julian W	Attorney Docket No.	CDL-026C3	Patent No.	Not applicable	Issue Date	Not applicable
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## **ENCLOSURES (check all that apply)**

<input type="checkbox"/> Fee Transmittal Form <ul style="list-style-type: none"> <li><input type="checkbox"/> Check Attached</li> <li><input type="checkbox"/> Copy of Fee Transmittal Form</li> </ul>	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553) <ul style="list-style-type: none"> <li><input type="checkbox"/> Replacement Drawing(s)</li> </ul>	<input type="checkbox"/> Request for Certificate of Correction <ul style="list-style-type: none"> <li><input type="checkbox"/> Certificate of Correction</li> </ul>
<input checked="" type="checkbox"/> Amendment/Response <ul style="list-style-type: none"> <li><input type="checkbox"/> Preliminary</li> <li><input type="checkbox"/> After Final</li> <li><input type="checkbox"/> Affidavits/declaration(s)</li> <li><input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____]</li> </ul>	<input type="checkbox"/> Request For Continued Examination (RCE) Transmittal <ul style="list-style-type: none"> <li><input type="checkbox"/> Power of Attorney (Revocation of Prior Powers)</li> </ul>	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences <ul style="list-style-type: none"> <li><input type="checkbox"/> Appeal Brief (in triplicate)</li> </ul>
<input checked="" type="checkbox"/> Petition for Extension of Time	<input type="checkbox"/> Terminal Disclaimer <ul style="list-style-type: none"> <li><input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application</li> </ul>	<input type="checkbox"/> Status Inquiry <ul style="list-style-type: none"> <li><input type="checkbox"/> Return Receipt Postcard</li> </ul>
<input checked="" type="checkbox"/> Information Disclosure Statement <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Form PTO-1449</li> <li><input checked="" type="checkbox"/> Copies of IDS Citations</li> </ul>	<input type="checkbox"/> Small Entity Statement <ul style="list-style-type: none"> <li><input type="checkbox"/> CD(s) for large table or computer program</li> </ul>	<input type="checkbox"/> Additional Enclosure(s) (please identify below)
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Amendment After Allowance	
<input type="checkbox"/> Sequence Listing submission <ul style="list-style-type: none"> <li><input type="checkbox"/> Paper Copy/CD</li> <li><input type="checkbox"/> Computer Readable Copy</li> <li><input type="checkbox"/> Statement verifying identity of above</li> </ul>		

<b>CORRESPONDENCE ADDRESS</b> <p>Direct all correspondence to: Patent Administrator            Proskauer Rose LLP            One International Place            Boston, MA 02110-2600            Tel. No.: (617) 526-9600            Fax No.: (617) 526-9899</p>	<b>SIGNATURE BLOCK</b> <p>Respectfully submitted,</p> <p>Date: January 18, 2008            Reg. No. 56,471</p> <p>Tel. No.: (617) 526-9717            Fax No.: (617) 526-9899</p> <p>/s/Scott K. Witonsky/            Scott K. Witonsky            Attorney for the Applicants            Proskauer Rose LLP            One International Place            Boston, MA 02110-2600</p>
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